2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000002889

Entity Name: HOLIDAY HOPE, INC.

FILED Oct 10, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
18225 NW 160 AVE WILLISTON, FL 32696		16030 NORTHEAST 3RD PLACE WILLISTON, FL 32696	
Current Mailing Address:		New Mailing Address:	
18225 NW 160 AVE WILLISTON, FL 32696		16030 NORTHEAST 3RD PLACE WILLISTON, FL 32696	
	e with s. 607.193(2)(b), F.S., the corporation did not receive	-	e.
Name and Address of Current Registered Agent: Name			Address of New Registered Agent:
EGAN, GREG 18225 NW 160 AVE WILLISTON, FL 32696 US		BAIN, EMMA J 16030 NORTHEAST 3RD PLACE WILLISTON, FL 32696 US	
The above in the State	named entity submits this statement for the purpose of Florida.	of changing i	ts registered office or registered agent, or both,
SIGNATURE: EMMA J BAIN			10/10/2007
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name:	D () Delete BAIN, JEAN 16030 NORTHEAST 3RD PLACE WILLISTON, FL 32696 P () Delete EGAN, GREG	Title: Name: Address: City-St-Zip: Title: Name:	P (X) Change () Addition BAIN, EMMA J 16030 NORTHEAST 3RD PLACE WILLISTON, FL 32696 S (X) Change () Addition PERRY, CATHERINE G
Address: City-St-Zip:	18225 NW 160 AVE WILLISTON, FL 32696	Address: City-St-Zip:	211 NORTHEAST 3RD STREET WILLISTON, FL 32696
Title: Name: Address: City-St-Zip:	V () Delete SHIELDS, JOHN 14495 NW HWY 225 REDDICK, FL 32686	Title: Name: Address: City-St-Zip:	V (X) Change () Addition ANDERSON, DEMITA G 18051 NORTHWEST 160TH AVE WILLISTON, FL 32696
Title: Name: Address: City-St-Zip:	T () Delete JONES, DEBRA 547 NORTHWEST 2ND AVENUE WILLISTON, FL 32696	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S (X) Delete LAW, KIM 4144 NORTHWEST 152ND STREET REDDICK, FL 32686	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) Delete ANDERSON, DEMITA 18051 NW 160TH AVE WILLISTON, FL 32696	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMMA J BAIN P 10/10/2007